

ELECTRONIC DETERMINATION	Papers circulated electronically on 12 July 2022.
Panel reference	PPSNTH-123 – Gwydir– DA 34/2021 5535 North Star Road, North Star
Chair	Paul Mitchell OAM

In rela	tion to this matter, I declare	that I have:	
	no known conflict of interes	t ⊠ OR	
	an $\operatorname{actual}^1\square$ , $\operatorname{potential}^2\square$ c	r reasonably perceived³ ☐ conflict	of interest, as detailed below:
R	v mon		
00		Paul Mitchell	18/7/22
Signat	ture	Name	Date
		anel chair is to ensure appropriate tersign this form, noting any addition	management measures are in place, as onal measures.
	Signature	Name	Date
Please	e return this form to the Plan	ning Panels Secretariat at <u>enquiry@</u>	Oplanningpanels.nsw.gov.au

<sup>&</sup>lt;sup>1</sup> An 'actual' conflict of interests is where there is a direct conflict between a member's duties and responsibilities and their private interests or other duties.

<sup>&</sup>lt;sup>2</sup> A 'potential' conflict of interests is where a panel member has a private interest or other duty that could conflict with their duties as a panel member in the future.

<sup>&</sup>lt;sup>3</sup> A 'reasonably perceived' conflict of interests is where a person could reasonably perceive that a panel member's private interests or other duties are likely to improperly influence the performance of their duties as a panel member, whether or not this is in fact the case.



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P) Pollon	Penny Holloway	12 July 2022
Signature	Name	Date
	panel chair is to ensure appropriate in tersign this form, noting any addition	management measures are in place, as onal measures.
Chair Signature	Name	Date

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Sheku .	STEPHEN GOW	13/7/22
Signature	Name	Date
	panel chair is to ensure appropriate ntersign this form, noting any additi	management measures are in place, as onal measures.
Chair Signature	Name	Date
Should a conflict be declared the p	Name  panel chair is to ensure appropriate ntersign this form, noting any additions.	management measures are in place, as onal measures.

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In relation to this matte	r, I declare that I have:	
no known conflict	of interest 🗹 OR	
an actual <sup>1</sup> □, pote	ential <sup>2</sup> □ or reasonably perceive	d <sup>3</sup> □ conflict of interest, as detailed below:
B. S. Egan. Signature	Satherine Li	gan 14, 107, 12020 Date
	ared the panel chair is to ensure and countersign this form, not	e appropriate management measures are in place, as ng any additional measures.
Chair Signature	Name	Date

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	1		
5			
6 hn lo	Me JOHN A	NUTON 14/7/22	•
Signature	WW JOHN A	Date	•
Should a conflict be de	Name	Date appropriate management measures are in	

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